



Commemorative Gift Form

Please print all information and return this form with your check made out to the:

West Hartford Library Foundation
20 South Main St. West Hartford, CT 06107
Attention: Janet Valencis

Questions, call Janet at: 860-561-6970

Donor Information:

Your Name: _____

Address: _____

Phone: _____

Email: _____

I would like my gift to be used to purchase: ☐ books ☐ audio books ☐ film/DVD ☐ no preference

Gift information:

In Honor of _____
Name

OR

In Memory of _____
Name

I would like to view my gift: ____ yes ____ no

Use this space if you would like additional wording on the book plate (optional):

Amount of your gift: \$ _____

Minimum gift amount is \$20.00.

Suggested subject areas: _____

Please note that all materials purchased are selected by professional staff in accordance with the library's collection development policy.

Gift announcement to be sent to:

Name: _____

Address: _____